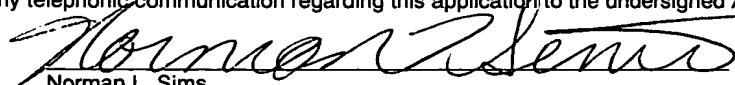


01/17/02

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>		<b>Attorney Docket No.</b> 44563A <b>Total Pages</b> 0
<i>For new nonprovisional applications under 37 CFR 1.53(b)</i>		
<b>First Named Inventor or Application Identifier</b> Bart R. Jones		<b>Express Mail Label No.</b> EU002298689US
<b>Title:</b> ADHESIVELY BONDED VALVE COVER CYLINDER HEAD ASSEMBLY		
<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> <b>Fee Transmittal Form</b> <small>(Submit an original, and a duplicate for fee processing)</small>		
2. <input checked="" type="checkbox"/> <b>Specification</b> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> <li>- Descriptive title of the Invention</li> <li>- Cross References to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to Microfiche Appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (if filed)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul>		
3. <input checked="" type="checkbox"/> <b>Drawing(s) (35 USC 113)</b> <b>[Total Sheets 5]</b>		6. <input type="checkbox"/> <b>Microfiche Computer Program (Appendix)</b>
4. <input type="checkbox"/> <b>Declaration and Power of Attorney</b> <b>[Total Pages _____]</b>		7. <input type="checkbox"/> <b>Nucleotide and/or Amino Acid Sequence Submission</b> <small>(if applicable, all necessary)</small> <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Copy</li> <li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li> <li>c. <input type="checkbox"/> Statement verifying identity of above copies</li> </ul>
a. <input type="checkbox"/> Newly executed (original or copy)		
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)  <i>[Note Box 5 below]</i></small>		
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>		
5. <input type="checkbox"/> <b>Incorporation By Reference</b> <small>The entire disclosure of the prior application identified in Box 18 is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</small>		
8. <input type="checkbox"/> <b>Assignment Papers (cover sheet &amp; document(s))</b>		
9. <input type="checkbox"/> <b>English Translation Document (if applicable)</b>		
10. <input type="checkbox"/> <b>Information Disclosure Statement (IDS)/PTO-1449</b> <input type="checkbox"/> <b>Copies of IDS Citations</b>		
11. <input type="checkbox"/> <b>Preliminary Amendment</b>		
12. <input checked="" type="checkbox"/> <b>Return Receipt Postcard (MPEP 503)</b> <small>(Should be specifically itemized)</small>		
13. <input type="checkbox"/> <b>Certified Copy of Priority Document(s)</b> <small>(if foreign priority is claimed)</small>		
14. <input type="checkbox"/> <b>Associate Power of Attorney</b>		
15. <input type="checkbox"/> <b>Sealed envelope containing confidential information, which Applicants may request to be expunged from the application file.</b>		
16. <input checked="" type="checkbox"/> <b>Authorization for payment of fees and Petition for Extensions of Time.</b>		
17. <input type="checkbox"/> <b>Other:</b> _____		
18. If a <b>CONTINUING APPLICATION</b> , check appropriate box and supply the requisite information: Amend the specification by inserting before the first line, the sentence: "This application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP)    of prior application No: _____ / _____."		
19. CORRESPONDENCE ADDRESS		
<input checked="" type="checkbox"/> <b>Customer Number or Bar Code Label</b>		 <b>000109</b> <small>PATENT TRADEMARK OFFICE</small>
or <input type="checkbox"/> <b>Correspondence address below</b>		
<b>NAME</b>		<b>STATE</b>
<b>ADDRESS</b>		<b>ZIP CODE</b>
<b>CITY</b>		
Please direct any telephonic communication regarding this application to the undersigned Attorney/Agent for Applicants:  Norman L. Sims		
Reg. No.: 30,685 Phone No.: 248/391-6455 Fax No.: 248/391-6550		

Assistant Commissioner for Patents  
Washington, D. C. 20231

Attorney's Case No. : 44563A

Application of : Bart R. Jones; Eugene J. Nykyforiak; David H. Bank; Ravi  
Ramanathan; David W. Recktenwald

For: ADHESIVELY BONDED VALVE COVER CYLINDER HEAD ASSEMBLY

No. of Drawing Sheets: 5

EXPRESS MAIL MAILING LABEL NO. EU002298689US  
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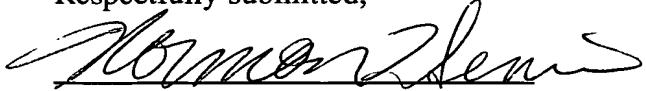
Sir:

Enclosed for filing is the above-identified application. Please charge the estimated fee to our Deposit Account No. 04-1512. An original and 2 copies of this sheet are enclosed.

A. Basic Filing Fee	<u>\$740.00</u>
Total Number of Claims	<u>25</u>
Less (Basic Fee)	<u>20</u>
B. Extra Claims	<u>5 x \$ 18.00 = \$90.00</u>
Total Number Independent Claims	<u>3</u>
Less (Basic Fee)	<u>3</u>
C. Extra Independent Claims	<u>0 x \$ 84.00 = \$0.00</u>
D. Multiple Dependent Claims Presented	<u>+ \$280.00 = \$0.00</u>
TOTAL FILING FEE (A+B+C+D) = <u>\$830.00</u>	

If this estimate is incorrect, please charge or credit our account accordingly.

Respectfully submitted,

  
Norman L. Sims  
Registration No.: 30,685  
Phone: 248/391-6455

THE DOW CHEMICAL COMPANY  
Intellectual Property  
P.O. Box 1967  
Midland, MI 48641-1967

Date: January 17, 2002

NLS:mfm

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